

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/500107

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| TOTAL CLAIMS                     |   |              |                          |
|----------------------------------|---|--------------|--------------------------|
| FOR                              |   | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 3 | minus 20 =   |                          |
| INDEPENDENT CLAIMS               | 1 | minus 3 =    |                          |
| MULTIPLE DEPENDENT CLAIM PRESENT |   |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  | Total                            | Minus |                                    |                          |
|  | 3                                | Minus | 20                                 | 1                        |
| Independent                                    | 1                                | Minus | 3                                  | 1                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

SMALL ENTITY  
TYPE

| RATE      | FEES |
|-----------|------|
| BASIC FEE |      |
| XS 9=     |      |
| X43=      |      |
| +145=     |      |
| TOTAL     |      |

OTHER THAN  
OF SMALL ENTITY

| RATE      | FEES |
|-----------|------|
| BASIC FEE | 910  |
| XS18=     |      |
| X86=      |      |
| -290=     |      |
| TOTAL     |      |

SMALL ENTITY OR OTHER THAN  
AMENDMENT B SMALL ENTITY

| RATE             | ADDITIONAL FEE | RATE             | ADDITIONAL FEE |
|------------------|----------------|------------------|----------------|
| XS 9=            |                | XS18=            |                |
| X43=             |                | X86=             |                |
| +145=            |                | +290=            |                |
| TOTAL ADDIT. FEE |                | TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE | RATE             | ADDITIONAL FEE |
|------------------|----------------|------------------|----------------|
| XS 9=            |                | XS18=            |                |
| X43=             |                | X86=             |                |
| +145=            |                | +290=            |                |
| TOTAL ADDIT. FEE |                | TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE | RATE             | ADDITIONAL FEE |
|------------------|----------------|------------------|----------------|
| XS 9=            |                | XS18=            |                |
| X43=             |                | X86=             |                |
| +145=            |                | +290=            |                |
| TOTAL ADDIT. FEE |                | TOTAL ADDIT. FEE |                |

| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  | Total                            | Minus |                                    |                          |
|  | 23                               | Minus | 21                                 |                          |
| Independent                                    | 1                                | Minus | 3                                  |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

\* The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.